1957



1957

COUNTY BOROUGH OF GATESHEAD

ANNUAL REPORT

OF THE

Principal

School Medical Officer

FOR YEAR 1957

JAMES GRANT, M.D. Ch.B., D.P.H. (GLASGOW)

Medical Officer of Health and Principal School Medical Officer

Digitized by the Internet Archive in 2017 with funding from Wellcome Library

1957



1957

COUNTY BOROUGH OF GATESHEAD

ANNUAL REPORT

OF THE

Principal

School Medical Officer

FOR YEAR 1957

JAMES GRANT, M.D. Ch.B., D.P.H. (GLASGOW)

MEDICAL OFFICER OF HEALTH AND PRINCIPAL SCHOOL MEDICAL OFFICER



EDUCATION COMMITTEE

at 31.12.57.

Chairman-Ald. Mrs. M. Gunn

Vice-Chairman—Coun. C. H. WHEATLEY

Ald.	T.	ROBERTS
1 1 1 CA 0	+7 *	TODRICES

M. GRANT

F. PATTISON

P. S. HANCOCK, O.B.E.

J. A. HUTCHISON

B. N. Young

Coun. W. M. COLLIGAN

W. J. PIKE

Mrs. M. Bell

Mrs. E. A. HARDY

Mrs. J. H. LISTER

R. N. BAPTIST

W. COLLINS

A. GALBRAITH

J. C. S. WHEATLEY

Coun. A. V. TURNBULL

Mrs. E. C. A. LUMSDEN

F. W. ROGERS

Mrs. A. E. JEWITT, J.P.

J. FITZPATRICK

Mr. W. Coates

Mrs. E. A. MEAD

Mr. J. Simpson

Mr. J. G. CARR

Mrs. M. O. Cusack, J.P.

Mr. G. F. WILKINSON

Mrs. L. BILTCLIFFE

Mr. G. C. Dowie

Mr. A. W. McKenzie

(King's College Representative)

CHILDREN'S CARE SUB-COMMITTEE

The Chairman (Ald. Mrs. M. Gunn) Coun. R. N. Baptist

Vice-Chairman (Coun. C. H.

Mrs. M. Bell

W. M. COLLIGAN

WHEATLEY)

M. GRANT Ald.

P. S. HANCOCK

J. A. Hutchison

F. PATTISON

J. ROBERTS

B. N. Young

W. COLLINS

A. GALBRAITH

Mrs. E. A. HARDY

Mrs. A. E. JEWITT

W. J. PIKE

F. W. ROGERS

STAFF OF SCHOOL MEDICAL SERVICE

317411 01 501100	E WESTONE SERVICE
Medical Officer of Health and Principal School Medical Officer Deputy Medical Officer of Health and Senior School Medical Officer	JAMES GRANT, M.D., CH.B., D.P.H. MARGARET B. HERBST, M.D., B.S., B.HY.,
School Medical Officers (and Assistant M.O's.H.)	D.P.H. CHARLES E. CAMM, M.B., B.S., D.P.H. (resigned 31.8.57) JEAN M. BAINBRIDGE, M.B., B.S.,
	D.R.C.O.G.
	EDWIN 1. BLENKINSOP, M.B., B.S.,
	D.P.H.
	MARY J. MOSSMAN, M.B., B.S.,
Ophthalmic Surgeons (part-time)	*H. V. INGRAM, M.B., B.S., D.O.M.S., M.R.C.S., L.R.C.P.
	*J. S. ARKLE, F.R.C.S.
Orthopaedic Surgeon (part-time)	†A. E. Bremner, M.B., CH.B., F.R.C.S.
Physiotherapist (part-time)	Mrs. G. Aynsley, M.C.S.P.
, , , , , , , , , , , , , , , , , , ,	(resigned 14.9.57)
Remedial Gymnast (part-time)	†T. D. Midgley, M.S.R.G.
Orthoptist	MISS J. F. MAUGHAN, D.B.O.
Speech Therapist	Miss M. Barnes
Principal School Dental Officer	Joseph Whitehouse, L.D.S.
Dental Officers	Miss Teresa M. Rossi, b.d.s.
	ISMAIL A. EBRAHIM, B.D.S.
	(resigned 16.3.57—temporary) ROBERT W. WHITTINGHAM, B.D.S.
	(resigned 30.11.57)
	HENRY D. NORRIS, B.D.S.
	Mrs. I. F. Jones, L.D.s.
	(commenced 1.5.57)
	BHOPINDER S. NARU, L.D.S.
	(temporary part-time—commenced
	1.12.57)
Dental Attendants	Miss M. Cessford, Miss E. E. Grass,
	MISS S. P. THOMPSON, MRS. E. DANBY (nee Besford), MISS P. A.
	Bagnall, Miss P. Smith.
Dental Technicians	T. W. Curtis, J. Gilholme.
Health Visitors and School Nurses	C. Robson (Supt.), I. Bradley, M.
	DAGLISH, D. C. JOHNSON, E. WISE,
	M. CRAGGS, E. POWLEY, J. TURN-
	BULL, S. W. ATKINSON, A. MULLEN,
	R. GARDNER, S. GILLEY, N. M. BELL,
	E. BAXTER, M. FAIRS, P. L. TROTTER,
	J. J. DUNCAN, M. M. HARRISON
	(temporary—part-time) (resigned
	16.1.57), M. McManemy (commenced 1.8.57).
Nursing Assistants	M. Coates, W. Craig, P. M. Jackson.
Clerical Staff	N. CRAIG, MISS E. M. JONES, MISS M.
**	ATKINSON, MRS. M. WATSON, MISS
	S. Corbitt (resigned 22.3.57), Miss
	M. H. Jobes, Miss J. McGill (com-
	menced 13.5.57—resigned 27.7.57),
	Miss E. Gilhespie (commenced
*Provide service under Sunnlamen	26.8.57).
	tary Ophthalmic Treatment Regulations. Newcastle upon Tyne Regional Hospital
Board.	Trontactic upon Tyne regional trospital

ANNUAL REPORT

OF THE

PRINCIPAL

SCHOOL MEDICAL OFFICER FOR THE YEAR 1957

To the Chairman and Members of the Education Committee.

In presenting this annual review of the work of the school medical service, I have once again to refer to the shortage of essential staff, which results in an undue pressure on the remaining members, who of course have to cover up the deficiency. The medical, dental, nursing and specialist staff all reflect this shortage of personnel, which I understand to be generally applicable to the skilled ranks of local authority employees. It seems that in this matter the policy of full employment enables industry and commerce to provide more attractive alternative employment.

It was pointed out last year that a very important subsidiary function of the school medical service was to proceed with the work of maintaining an immune community, especially in regard to tuberculosis. It is with some regret that I have to report that we were not able to complete the planned B.C.G. vaccination scheme in 1957, because of the additional work entailed in carrying out the poliomyelitis vaccination policy of the Ministry of Health. As is generally known, the Minister asked specially that the utmost priority should be given to the scheme of inoculation against poliomyelitis, and with the present staffing it was not possible to cover also the scheme of B.C.G. vaccination. Steps are, however, being taken to attempt to build up the staff to the established figures.

One feature of school medical organisation in Gateshead, on which the Committee is to be congratulated, is in the provision of special schools and classes for handicapped children. It may be said that the provision already made is fairly reasonable, but new developments in the education of deaf children suggest that it is possible to begin this at a much earlier age than has hitherto been customary by supplying the child with a light transistor hearing aid and attempting to teach the child as if he were equipped with hearing. In other parts of the country this policy has been adopted, but I regret that there is no local facility yet provided for this kind of instruction of the very young deaf children. This matter is clearly one for joint action by the Education Authorities acting in concert. It is understood also that provision is to be made at long last for child guidance facilities.

and a child psychiatric clinic is to be set up in Newcastle by the Regional Hospital Board and the University. This organisation, in the control of which the local education authorities do not seem to be fully represented, is understood to be mainly for the purpose of training the future child guidance personnel who will be employed by local authorities.

As in former years, I must express my appreciation of the friendly co-operation of the teaching staff and of the Director of Education and his Deputy. The administrative and welfare officers of the Education Department have been most helpful, while the general practitioners of the area and the hospital consultants have provided much information and helpful advice in the problems affecting school children. My personal thanks are due to the members of my professional and clerical staff for their work during a busy year, and in particular I would like to cite the name of my deputy, Dr. Margaret Herbst, who at the time of writing this report has left the service to enjoy a well-earned retirement.

Your obedient Servant,

JAMES GRANT,

Medical Officer of Health and Principal School Medical Officer

1. STAFF

There were various changes in medical, dental and nursing staffs during 1957.

Dr. C. E. Camm resigned in August and the medical staff remained depleted for the rest of the year.

Mr. Ismail A. Ebrahim resigned in March and Mr. Robert W. Whittingham resigned in November. These were both dental surgeons. However, their places were taken by Mrs. Jones and Mr. Bhopinder S. Naru, who was employed temporarily on a part-time basis.

The nursing staff also remained below full strength. Mrs. Harrison, who had been employed part-time, resigned. Miss McManemy commenced duties in August. However, at the end of the year, the nursing staff were three short of the establishment. We also lost the services of the part-time physiotherapist, Mrs. Aynsley, who gave six sessions a week.

There were also changes among the clerical staff. Miss Corbitt resigned and Miss McGill commenced duties in May, but she resigned in July, and Miss Gilhespie commenced duties in August.

2. CO-ORDINATION

The medical, nursing and dental staff of the Local Authority are common to the school medical and maternity and child welfare services; where the health visitors find serious defects among the young children, the names and other particulars are passed on to the school medical service at the age of two years, so that the school medical officers may have an early opportunity of assessing the defects and deciding whether special education is likely to be necessary. The local arrangements provide for continuity of supervision of the health of the children from infancy to the end of school life.

3. SCHOOL BUILDINGS

There were no new schools opened in Gateshead during 1957.

4. SCHOOL MEDICAL INSPECTION

The number of children on the school registers at the end of 1957 was 17,366. Of these, 4,967 were examined at the periodic inspections.

Entrant Group			 1,567
Intermediate Group			 2,048
Leaver Age Group	T		 1,352
Additional Periodic	Exami	nations	
			4.067
		é	4,967

Outside these age groups, 393 examinations were done. 2,717 (i.e. 54.7%) of the parents attended at the examinations.

5. ASSESSMENT OF GENERAL CONDITION

During the periodic examinations children were classified as:—

Satisfactory	 	98.76%
Unsatisfactory	 	1.24%

The condition of the children was better than last year, when 2.22% were classified as of poor nutrition.

6. ASCERTAINMENT OF DEFECTS

(a) Cleanliness

There were 2 children with body lice, 5 children examined by the school medical officers had head vermin, and on 361 children nits were recorded. 15 children were flea-bitten and 57 found to be dirty. School nurses doing cleanliness surveys reported 128 children with head vermin, 1,985 having nits present. The nurses made 50,568 examinations.

(b) Skin Condition

From the periodic inspections and from children attending the minor ailments clinics, those requiring treatment for skin conditions were:—

Impetigo		 100
Ringworm scalp		
Ringworm body		 5
Scabies		 10
Eczema and Derm		 13
Minor Skin Condi	itions	 461

(c) Visual Defects

The eyesight of all the 8 year old school children is tested by school nurses. During the year, 1,443 were tested and of these 225 were found to require refraction and 258 were kept under observation. At routine medical inspections 819 children were found to require treatment, and a further 195 were kept under observation. 152 children were found to have squints requiring treatment.

At special inspections, either at the clinic or in schools, a further 243 children were found to require treatment. 121 were kept under observation, and another 18 were found to be suffering from squint.

It is very important that eye defects should be found and treated at the earliest possible time. 63 cases of external eye disease were seen at school during routine inspections and 141 at minor ailments clinics.

(d) Nasopharyngeal Disease

Enlarged tonsils and adenoids were recorded in 411 children, of whom 59 required treatment. 247 children had palpable neck glands, 9 of which required treatment. The remaining 238 were kept under observation. Nasal catarrh occurred in 25 of the children seen; 9 required treatment and the remaining 16 were kept under observation.

(e) Ear Conditions

Chronic otitis media was present in 46 children of the 135 having subnormal hearing, 38 were referred for audiometer testing or for treatment. 59 children had wax in their ears.

(f) Dental Defects

Among 4,967 children examined, 1,067 were found to be suffering from dental caries, and in 261 this was extensive. 50 had dirty teeth.

(g) Postural Defects

54 were referred for treatment, against 27 last year. In addition 22 were referred for observation.

323 cases of foot defects were referred for remedial treatment and 139 for observation. 4 cases of hallux valgus were referred for treatment and 2 for observation.

(h) Heart Disease and Rheumatism

114 children were recorded as having heart lesions. 7 required treatment and 107 were kept under observation. The majority of cases were of minor importance. There were 2 cases of acute rheumatism.

(i) Tuberculosis

B.C.G. vaccination was again offered to children approaching school leaving age. This offer was accepted on behalf of 68.5% of children. This is a drop from the previous year, when it was 79.6%, which is rather disappointing.

Children born in 1943

Number	offered vaccination	 1,196
Number	accepted	 819
Number	tested	 800
	of positive reactors	 187
Number	given B.C.G.	 576
Number	x-rayed	 133

The X-ray results were as follows:—

Increased markings Calcified Hilar Glands Calcified Primary Complex Other abnormalities Nil abnormal		$1 \\ 4 \\ 2 \\ 2 \\ 124$
Total	• • •	133

Conversion tests were done on some of those who had been vaccinated with B.C.G., with the following results:—

Children born in 1943

Number	tested	 199
Number	positive reactors	 194
Number	negative reactors	 1
Number	not read	 4

An annual check was made on those done the previous year.

Children born in 1942

Number	tested	 123
Number	positive reactors	 120
Number	of negative reactors	 2
Number	not read	 1

Owing to the shortage of staff, the B.C.G. Vaccination programme has fallen behind. However, it is hoped that this will be rectified in the near future.

The Chest Physician supplied the following particulars of notified tuberculosis in children:—

Pulmonary Tuberculosis

Infectious			2
Non-Infectious			111
Non-pulmonary Tu	uberculos	is	
Glandular			6
Joints			7
Other organs			19
Abdomen			2

At the beginning of 1957, 16 children were undergoing treatment in hospitals. During the year, 22 patients were discharged and 16 new cases admitted; 10 children were still undergoing treatment at the end of the year.

(j) Vaccination and Immunisation

1,822, 38.7% of those examined, had been successfully vaccinated against smallpox, and 3,152 or 65.5% had been immunised against diphtheria and whooping cough.

(k) Clothing and Footwear

On the whole, these were adequate, although 3 children were found to have insufficient clothing.

7. SUBSEQUENT EXAMINATIONS

In following up defects found during examination of this and previous years, 3,125 children were seen. In this connection the school nurses made 409 home visits.

8. ARRANGEMENTS FOR TREATMENT

The services available for medical, surgical and dental treatment are as follows:—

Minor Ailments

Greenesfield Health Centre	Monday-Friday	9.0-9.30 a.m.
	C	4.0-4.30 p.m.
	Saturday	9.0-10.0 a.m.
Carr Hill Health Centre	Monday-Friday	9.0-9.30 a.m.
	Saturday	9.0-10.0 a.m.
Ultra-violet Ray Therapy	Tuesday and Friday	1.30-3.30 p.m.
Physiotherapy	By appointment	
Orthoptic Treatment	By appointment	
Dental Treatment	Monday-Friday and	4.0-4.30 p.m.
	daily by appointment.	•
Immunisation	Saturday	

The consultant services available by appointment are: —

Ophthal	lmolog	gist
(Refr	action	Clinic)

Orthopaedic Surgeon

Dermatologist
Throat, Nose and Ear
Surgeon
Psychiatrist

Tuesday and Saturday 9.0-11.0 a.m. at Greenesfield Health Centre Alternate Wednesdays at 9.0 a.m. Greenesfield Health Centre At Queen Elizabeth or Bensham Hospital

At Children's Hospital By arrangement with St. Thomas' Clinic or Newcastle General Hospital

(a) Cleanliness

68 heads were cleansed by nursing assistants. During the year, special combs were lent on 8 occasions, and 121 combs were sold. Cleansing lotion is available for use at home.

(b) Treatment of Minor Ailments and Diseases of the Skin

The number attending the clinic for treatment rose during the vear.

Those who attended for treatment were: —

	No	. attending	No. Treatments
Ringworm Scalp			
Ringworm Body		5	57
Scabies		10	73
Impetigo		100	613
Other skin conditions		474	3,237
External eye conditions		141	569
Otitis media		28	185
Other ear conditions		49	298
Miscellaneous		657	3,084
Tot	al	1,464	8,116

The numbers represent an increase on the experience of last year except in regard to Ringworm and Scabies.

(c) Treatment of Ophthalmic Defects

91 clinics were attended by Mr. H. Vernon-Ingram and Mr. Arkle. 1,067 children were seen. Glasses were prescribed for 814 children and 41 cases were found to be already wearing suitable glasses.

Errors of refraction found were: —

Hypermetropia			 268
Myopia		• • •	 105
Hypermetropic astigma	atism		 98
Myopic astigmatism			 38
Irregular astigmatism			 3
Compound myopic asti			 141
Compound hypermetro	pic asti	gmatism	 485
Mixed Astigmatism			 126

In addition to these the following defects were recorded: -

Strabismus	 192
Amblyopia exanopsia	 21
Blepharitis	 3
Amblyopia	 16
Conjunctivitis	 1
Paralysis R.E.R.	 1
Overaction 1.0.	 1
Cataract	 2
Anisometropia	 1
Subluxated lens	 1

The waiting list has now been reduced from 63 at the end of 1956 to 54 at the end of this year. We can now offer refraction without any undue delay.

Orthoptic Clinic

During this year 2,074 attendances were made for the following reasons:—

Occlusion						267
Observation						931
Weekly or	post-o	perati	ive daily	treatmer	ıt	486
Reports						1 68
New cases		• • •	* * *			120
(2 of these	cases	were	discharg	ged some	years	ago)
Discharges						111

761 appointments were not kept during the year.

The new cases were classifie	ed as fo	illows:-		
Right convergent concomitant	strabism	nus		22
Left convergent concomitant s				45
Alternating convergent concor				12
· · · · · · · · · · · · · · · · · · ·	• • •			4
Esophoria with left amblyopis	a			1
Right divergent concomitant s				2
Left divergent concomitant st				5
Alternating divergent concon				1
Intermittent divergent concor				$\overline{2}$
Paralysis with corresponding				
more extrinsic extra-ocula				4
Right amblyopia ex anopsia				$\tilde{2}$
Left amblyopia ex anopsia		• • •		3
Convergence deficiency				17
convergence demorately	* * *	•••	• • •	
				120
				2-0
The discharges were classified	d as fol	lows:—	_	
			_	29
Cure		• • •		29 26
Cure		• • •		
Cure Improved Cosmetic cure only, defective		 ar vision		26
Cure Improved Cosmetic cure only, defective Intractible amblyopia	 binocul	 ar vision 		26 4
Cure Improved Cosmetic cure only, defective Intractible amblyopia Failed to attend	 binocul 	 ar vision 	• • • • • • • • • • • • • • • • • • • •	26 4 6
Cure Improved Cosmetic cure only, defective Intractible amblyopia Failed to attend No co-operation	 : binocul 	 ar vision 	• • • •	26 4 6 33 7
Cure Improved Cosmetic cure only, defective Intractible amblyopia Failed to attend No co-operation Not willing for operation	 binocul 	 ar vision 		26 4 6 33 7 1
Cure Improved Cosmetic cure only, defective Intractible amblyopia Failed to attend No co-operation Not willing for operation Left district	 binocul 	 ar vision 		26 4 6 33 7
Cure Improved Cosmetic cure only, defective Intractible amblyopia Failed to attend No co-operation Not willing for operation	binocul operatio	 ar vision on, previ		26 4 6 33 7 1
Cure Improved Cosmetic cure only, defective Intractible amblyopia Failed to attend No co-operation Not willing for operation Left district Not suitable for treatment or	binocul operation	ar vision on, previ	 ous	26 4 6 33 7 1 2
Cure Improved Cosmetic cure only, defective Intractible amblyopia Failed to attend No co-operation Not willing for operation Left district Not suitable for treatment or attendances for observati	binocul operation only	ar vision on, previ were d	 ous 	26 4 6 33 7 1 2

Just under half of the new patients registered were under school age. This seems to prove that parents are realising the need for immediate treatment after the onset of any deviation. The number of non-attendances is, of course, still far too high, and there are still some parents (fortunately only a few) who refuse to let the children wear glasses, occluders or have operations for squint.

As before, 8 sessions per week were worked at Greenesfield, 1 at Carr Hill and 2 at the Fleming Hospital, Newcastle.

(d) Throat, Nose and Ear Defects

At the Children's Hospital, 197 tonsillectomies and 32 operations for other conditions of the nose and throat were performed. 12 children had operative treatment there for ear defects. The school medical officers dealt with 28 cases of chronic otorrhoea, and with 42 cases requiring the removal of cerumen from the external meatus.

(e) Treatment of Dental Defects

(Report of the Principal Dental Officer)

Staff

The staff of the dental department consists of the principal dental officer, three full-time and one part-time dental officers, six dental attendants and one clerk. The dental laboratory is staffed by one senior technician in charge and one senior technician.

During the year Mr. Ebrahim, B.D.S., and Mr. Whittingham, B.D.S., resigned on 31.1.57 and 30.11.57 respectively. Replacement appointments became effective on 1.5.57 by Mrs. I. F. Jones, B.D.S., commencing her duties and on 2.12.57 by Mr. Naru, L.D.S., carrying out part-time duties for six sessions per week. This change of staff means a loss over the year of the equivalent of one-third of a dental officer's time.

As in previous years, approximately two-thirds of the dental officers' time was devoted to school children, the remaining time being devoted to the priority dental services.

Dental Treatment

During the year routine inspections were increased by 1,693 and special inspections reduced by a further 494. The number of children found to require treatment was 75.3%, an increase of almost 4%, but the percentage accepting treatment fell from 64.3% to 51.4%. Regular dental treatment given to children by private practitioners is obviously on the increase, although no figures are available by which a true assessment can be made, and this would, in no small measure, account for the decline in the acceptance rate. The average attendances per child remained almost the same as the previous year, i.e. 1.94.

There has been a slight increase in the amount of treatment given per session throughout the year with the same dental officer strength. Dentures supplied to children number 47, a decrease of 5, a small but welcome decrease. The total number of fillings shown in Table V. includes 8 'crowns'. It has been possible to increase the amount of orthodontic work this year, and it is hoped that more of this kind of work will be undertaken during 1958. The number of x-rays taken was 115.

I would like to thank the staff of the dental department for their work during the year, and the schools staffs for their help and co-operation. Table V. summarises the dental treatment given to school children for the year.

J. WHITEHOUSE,

Principal Dental Officer.

(f) Orthopaedic and Postural Defects

54 cases attended for the first time the orthopaedic consultation clinics held by Mr. A. E. Bremner, F.R.C.S. In addition, he re-examined 79 cases he had previously seen.

The types of lesions found were as follows: —

:-	New	Old	
Defects	cases	cases	Visits
Congenital malformations	 1	8	13
Spastic conditions	 3	14	30
Sequelae to poliomyelitis	 1	5	13
Osteogenesis imperfecta	 	1	2
Scoliosis	 2	4.	12
Defective posture	 2	3	12
Genu valgum	 4	3	12
Pes planus	 10	10	30
Foot defects	 10	19	38
Exostosis	 1	1	2
Old fractures	 1		1
Shortening of leg	 	3	4.
T.B. Spine	 	1	2
Pains in feet	 2		4
Wasting of leg	 1		2
Friedreich's ataxia	 	1	2
Cyst on cartilage	 1		1
Paralysis of foot	 	1	1
Nothing abnormal detected	 17	6	27

Greenesfield Clinic

We were unfortunate enough to lose the part-time services of the physiotherapist, Mrs. Aynsley, who devoted 6 sessions a week of her time divided equally between the Open Air School, the Cedars Special School and the Greenesfield Clinic. In spite of every effort we have been unable to obtain the part-time services of any physiotherapist, so that, apart from the work which has been done by Mr. Midgley, a Remedial Gymnast employed by the Hospital Management Committee, there has virtually been nothing in the way of physiotherapy in the Cedars School, the Open Air School or at Greenesfield Health Centre.

The Remedial Gymnast attended Greenesfield Health Centre six (half-day) sessions per week, and gave the following treatments, both individual and in classes as listed below:—

INDIVIDUAL TREATMENTS

Cerebral Palsy				
			Patients	Treatments
Spastic Hemiplegia			9	122
Spastic Diplegia			1	7
Nerve Lesions				
Lacerations of Forear (Ulna palsy)			3	67
Post poliomyelitis			5	77
Tost portonly critis	* * *	• • •	Ü	• •
Traumatic Injuries				
Supra Condylar Fracti	ures		47	238
			1	7
Fractures of Tibia and			14	51
Fractures of Radius and Fractures of Phalanges			17 11	$\begin{array}{c} 73 \\ 41 \end{array}$
Practures of Finalanges	• • •	• • •	11	41
Dislocations				
Elbow Joint			1 3	65
Phalangeal Joints			1	2
Tendon and Soft Tissue In				_
Contracture of phalang	es		3	21
Effusion of knee Effusion of elbow	• • •		1 5	$\begin{array}{c} 12 \\ 22 \end{array}$
Tendo achilles strain		• • •		9
Lacerations			3 3	$1\overset{\circ}{2}$
Torticollis	• • •		2	4
	70.4.1.		120	920
	Totals		139	830
Thest Conditions	1.75	,	2	3.5
Bronchicctasis (Postura		ge)	$\frac{2}{2}$	15
Asthma Atelectasis	• • •		$\begin{array}{c} 21 \\ 10 \end{array}$	$\begin{array}{c} 163 \\ 136 \end{array}$
0 1 111			6	34
			$\overset{\circ}{2}$	11
Poor chests and postu	re		4	34
(Treated by breathing	g exercise	es)		
	Totals		45	393
				4
Postura	ı Dene	C TIC	,	
	L DEFE	613		
Postural Defects			10	0.0
Lordosis	0 0 4	• • •	$\frac{12}{6}$	93 3 1
Kyphosis Kypholordosis	• • •	• • •	6 2	13
Scoliosis			$\frac{2}{7}$	60
Poor thoracic posture			$\dot{10}$	63
•	m -			
	Totals		37	260

FOOT, ANKLE AND TOE DEFECTS

Treatments of Defects of the foot and ankle and of toe deformities is carried out in classes, except the more severe of these cases. which are treated individually.

The length of the course of treatment varies in accordance with the progress, in some cases more than one course of treatment being necessary.

	Patients	Treatments
Pes Planus Pes Valgus Hallux Valgus	131	823

PRE-SCHOOL CHILDREN

			Patients	Treatments
Traumatic Injuries				
Fractures of femur			3	6
Fractures of Tibia			4	1 3
Dislocation (elbow)		1	10
Burns (foot)			1	2
Miscellaneous				
Talipes			4	42
Torticollis	• • •		1	3
Pes planus	* * *	• • •	1	2
	Tota	l _s	15	78

(g) Ultra-Violet Ray Therapy

Courses of ultra-violet ray therapy were recommended for:—

Respiratory	infections				• • •	3
$\operatorname{Bronchitis}$						2
Asthma						
General deb	ility and su	ubnor:	mal nutri	tion		14
Anorexia				• • •		4
Acne						28
Other skin	conditions		4			7
Adenitis						
Nervous syr	mptoms					
Repeated co						4

9. INFECTIOUS DISEASE AND IMMUNISATION

Cases of infectious disease occurring among school children were:—

Measles			 787
Scarlet fever			 180
Whooping coug	gh		 26
Meningococcal	infection		 _
Poliomyelitis:	paralytic		 1
Poliomyelitis:	non-paraly	tie	 1
Pneumonia			 32
Dysentery			 116
Scabies			 13
Food poisoning			 12
Infective encep	halitis		
Paratyphoid			 1

Booster doses of Diphtheria P.T.A.P. were offered to infant entrants at school, 226 accepted and were re-immunised. This drop in number was due partly to lack of medical staff and partly because of the fact that the staff were engaged in the poliomyelitis immunisation campaign.

At Greenesfield House 1 child was immunised against diphtheria alone. 2 against diphtheria pertussis and tetanus, and 27 "booster" doses were given. The doctors of the area reported the following inoculations given by them to school children.

Diphtheria, pertussis and	tetanus	 2
Diphtheria and pertussis		 4
Diphtheria (booster)		 45
Diphtheria		 9
Vaccination		 18
Re-vaccination		 10

5 children were vaccinated by the Local Authority.

10. PHYSICAL EDUCATION

Apparatus

Seven sets of Basketball posts were supplied to Mixed and Boys' Schools, and three Junior and Infants' Schools supplied with the "Gateshead" portable agility apparatus.

P.E. Clothing and small apparatus

Replacements of plimsolls, shorts and blouses were made to Departments needing them, and all schools were supplied with adequate games and P.E. small apparatus.

Play Fields

During the year the use of the Old Fold field for games was lost to the Schools. Breckonbeds field was used only occasionally owing to the bad surface and long grass. Moss Heaps was used by schools during and outside school hours.

Demonstrations and Festival of Dance

Demonstrations to Teachers and Head Teachers showing work by schoolchildren on portable apparatus were held. A Festival of Dance was held in the Town Hall on Tuesday and Wednesday, 2nd and 3rd April, children from 16 schools taking part in English, Irish, Scottish and Scandinavian Dancing.

Swimming

Instruction was given as follows:—

Boys—nine half days per week.

Girls—ten half days per week—an increase of one half-day per week on previous years.

All children attending the Baths were examined at the end of each term by the Organiser of P.E. with the following results:—

Results for 1957	Boys	Girls
1st Class Certificate	21	8
Life Saving Certificate	126	144
2nd Class Čertificate	321	280
Learner's Certificate	599	471
Other Swimmers	1155	956
Non-Swimmers	547	528
Total Examined	2769	2387
Percent. of swimmers 8	30.2%	77.9%
Royal Life Saving Soc.		
Award of Merit		1
Bronze Medallion	79	98

In addition to the above R.L.S.S. awards 49 boys and 21 girls at their own expense gained the R.L.S.S. Bronze Cross award.

Schools' Swimming Association

The Association had another successful and satisfactory year. Two Galas were held in Shipcote Baths during 1957 which was a return to normal procedure. This was not possible in the summer of 1956 because of closure of Baths for repairs in the early part of the swimming season.

Preliminary Gala, 13th June

More than 300 school children took part as competitors.

Main Gala, 8th July

This Gala was opened by His Worship the Mayor, Alderman A. Crossley. Winners of each event, and the fastest loser in each event of the Preliminary Gala competed. First, Second and Third in every event in the main Gala received certificates. A hundred certificates in all were issued by the Organiser of Physical Education.

Gateshead boys and girls took part in two Northumberland and Durham Schools' Association Galas, one held at Sunderland and one at Durham.

Two additional competitive events were held this year, both in Shipcote Baths.

5th March—Grammar School v. The Rest.

26th March—Gateshead Boys v. Newcastle Boys.

Under the Committee's provision for Further Education, classes were also held in the following:—

- (a) Country Dancing.
- (b) Keep Fit Women.
- (c) Recreative P.E. Men.

H. L. ATKINSON,

Organiser of Physical Education.

11. CO-OPERATION WITH OTHER AGENCIES

The co-operation and assistance of the Director of Education. Welfare Officers and teachers during the year was greatly appreciated, as were the services of the N.S.P.C.C. Officer, Mr. F. Maidment.

12. HANDICAPPED PUPILS

Children found during the year to require special educational treatment were:—

Deaf		 1
Partially deaf		
Blind		 2
Partially sighted		
Educationally subne	ormal	 82
Delicate		 40
Defective speech		 51
Epileptic		
Maladjusted		
Physically handical	ped	 8

Supervision was given to 17 children who have been supplied with hearing aids and are attending ordinary schools.

All deaf children have been placed in residential schools.

Mental Defect

106 children were given mental assessments. Of these 8 were found to be ineducable. For the remainder the following recommendations were made:—

School for E.S.N. Pupils	 2
Class for retarded Pupils	 80
Special tuition in ordinary schools	 10
No special educational treatment	 6

Classes for Backward Pupils

Two junior and two senior classes cater for retarded pupils. In September a new special class was started. This caters for children from 5-7 years old. It is situated at Victoria Road. It would seem that there is an increasing need for special classes for retarded pupils.

Special Schools

Joicey Road

At the end of the year 136 pupils were in attendance at the school, which caters for delicate children of all types.

As was noted last year, there was a gradual falling off in the higher age group of 12-15 years requiring this type of schooling, whereas the number in the group 6-8 years is slowly increasing. This has lead to some re-organisation on the teaching side, e.g., the provision of books and equipment for the use of children in the primary age range, and the provision of new furniture in some classrooms and in the dining hall. The change was necessary to meet the needs of the younger children and because the classroom furniture provided when the school was opened was designed for the use of the physically handicapped children and is not now necessary.

We are indebted to the willing acceptance by the teaching and nursing staff of the more onerous supervisory duties which the care of the younger children involves. I think this has been amply repaid by the improvement seen in their general condition. Concern was felt, at first, at the effect a long bus journey and a full day so far from home may have on the youngest children. However, they have settled well.

The senior class now has an age range of 12-15 years. Every effort is made, if the children are fit, to transfer them back to the normal school in time to allow them at least two terms in an ordinary school. This allows them to adjust themselves to a more strenuous routine and it enables the medical staff to assess more accurately their ability to stand up to the rough and tumble of life.

During the year, 46 children were discharged, whilst 49 were admitted with the following defects:—

T.B. Glands	 1
Congenital heart lesion	 5
Bronchial asthma	 4
Recurrent bronchitis	 14
Bronchiectasis	 4
Delicate	 12
Asthma	 5
Nervous Debility	 1
General debility	 2
Perthe's Disease	 1

It has been a matter of considerable concern that since the physiotherapist resigned last September we have been unable to fill this post. Therefore many children who would benefit from this treatment have been unable to obtain it. However, it has been arranged that the most urgent cases receive treatment at the hospital.

The "Cedars" School for Handicapped Children

The number of children attending the school during the year was 32, of whom 15 were resident. The school accepts resident handicapped children from outside the Borough.

Children were admitted to the school for the following conditions:—

Cerebral palsy				11
Poliomyelitis sequelae				6
Limb amputations				2
Healed tuberculous dise			with	
disability				3
Spina bifida with Hydro	cephalus	3	• • •	Ť
Muscular Dystrophy	· · ·			î
Oppenheim's Disease				1
Fragilitis Ossium				1
Congenital defects				2
Haemophilia				2
Heart conditions				4
Asthma and bronchiecta	\sin			1
7D 1 1	• • •			2
Right hemiplegia follow		ingitis		1
Perthe's Disease				1
Friedreich's Disease				ī
			_	
				40
				10

Here again, the resignation of the physiotherapist in September has prevented children from receiving regular physiotherapy.

Although 3 children are non-ambulant, all the children are encouraged to lead as full and as normal a life as possible in spite of their handicaps.

The girls have a Brownie and Guide Troop. The boys receive instruction in first aid from a member of the St. John Ambulance Association, who visits them every week. Both the boys and girls are members of a record group. This meets once a week.

Hindley Hall for Educationally Subnormal Pupils

The year 1957-58 has been one mainly of consolidation, during which period our numbers have risen to 50 boarders. During the year, three boys left school, two of whom it is known have obtained satisfactory employment. The third lad, who is in care of the Children's Officer, Kent, has been placed in a

new E.S.N. School Leavers Hostel, run by the National Association for Mental Health. Five more boys will leave at the end of this term. News of old boys remains good and many of them keep in touch by letter and by regular visits to the School.

The various Societies catering for drama, sports and athletics, model making, stamp collecting, music and dancing have maintained a full programme. Our Army Cadet Unit continues to flourish and week-end camps spent at Hartley W.E.T. Camp have proved particularly rewarding. We have recently been able to use the .22 miniature rifle range at Newburn Drill Hall. The cadets have thoroughly enjoyed this, and we have found two or three promising marksmen, one of whom it is hoped may be selected to represent the 4/5th Battalion (Cadet) R.N.F. in the inter-battalion shoot to be held later in the year. The Company received a very favourable report on its Annual General Inspection.

Throughout the year visits have been made to places of interest and entertainment. Bonfire Night and Christmas parties were held at the school. Carol Services were also held and a most moving Nativity Play was presented to visitors and friends of the school by our Senior boys.

The Vicar is preparing a number of our older lads for confirmation, and the Roman Catholic clergy regularly visits our two boys of that faith and arrangements for their weekly attendance at Mass continues to be very satisfactory.

Regular visiting days for parents and friends have been held throughout the year.

The headmaster and matron have been successful in interesting a number of local people in some of our boys who are "in care" and who do not normally have visitors on the days set aside for that purpose. These friends of the school have co-operated well by taking these lads out to tea and special outings.

Perhaps the most popular evening among the senior boys is the fortnightly visit to the Newcastle Jesmond Dene Special School for Educationally Sub-normal Girls. This is an excellent social occasion with modern dancing the highlight of the party. The boys continue to help in the cultivation of the kitchen garden and care for a changing variety of livestock, including at present poultry, pigeons, jackdaw, slow-worm and a miscell-aneous assortment of toads and newts.

The teaching staff situation still remains difficult. Her Majesty's Inspector has reported that gross understaffing on the teaching and supervisory side is producing a high degree of strain and placing far too continuous and exacting responsibility on the headmaster and existing assistant teaching staff. Fortunately three bungalows for married staff have recently been completed and it is hoped that this provision will do much to solve the problem.

There has, however, been much greater stability on the domestic staff side. We are now fully established but it will be remembered that the only resident members are the Matron and her assistant.

The school drive which was in poor condition has recently been re-surfaced and gives a much more attractive approach to the main school entrance.

Three boys were admitted to Hexham General Hospital for appendicectomy. Thirty-four boys were affected during the 'Asian Flu' epidemic and a number of staff, both teaching and domestic. Apart from this the general health of all concerned has been exceptionally good.

The number of visitors arriving at the school has tended rather to increase than to decrease. These have included medical officers from the Public Health Department, representatives from the Children's Departments, Probation Officers, Magistrates, teachers interested in special school work, parties from training colleges for teachers, various clergymen and the Youth Employment Officer. All have found the work performed by this school of great interest.

During the year the school was fully inspected by a team of Her Majesty's Inspectors, and a medical officer of the Ministry.

Throughout the year our happy family atmosphere has prevailed, and looking back, despite many difficulties, I think we have spent a very happy time together.

M. Morgan,

Headmaster.

Peripatetic Teacher

Two teachers visit both the homes and the hospitals in the Borough for the benefit of those children spending long periods away from school while undergoing treatment. At the end of the year, they were attending 6 children at home and 4 in hospital.

Pupils Educated outside the Borough

Children in residential schools not maintained by the Local Authority are:—

Deaf			23
Partially deaf			3
Blind			5
Partially blind			4.
Physically handicar			3
Evilantia	ped	• • •	2
Educationally subn	ammal		6
	ormai		1
Maladjusted			1

The above pupils attend the following schools: —

Deaf and Partially Deaf

St. John's, Boston Spa	 6
Lawns House, Leeds	 6
Northern Counties, Newcastle	 14

Blind and Partially Blind

Royal Victoria School for the	Blind,
Newcastle	3
Hershaw School	1
Royal Normal College, Shrewsbury	1
St. Vincent's School, Liverpool	2
Preston School for Partially Sighted	1
East Anglican School for Blind	. 1
East Anglican School for Blind	1

Physically Handicapped

St. Vincent's Or	rthopaedic	Hospital,	Pinner,
$\operatorname{Middlesex}$			1
Percy Hedley S	chool for	Spastic Cl	nildren,
Newcastle	• • •		2

Epileptic

Lingfield	Epileptic	Colony,	Surrey	• • •	2
-----------	-----------	---------	--------	-------	---

$Educationally\ subnormal$

Pontville R.C.	School, Ormskirk	 1
Jesmond Dene	House Special School	 5

Maladjusted

Larches Houses Hostel, Preston ... 1
The following table gives details relating to the education of handicapped children:—

		No. in Ordi-				No. on Waiting List for Special Not Schools attend		
Category	No. on Register	nary School	Day	Resi- dential	Day	Resi- dential	ing any school	
Blind	6			5		1		
Partially sighted				4		_		
Deaf	24			23		1		
Partially deaf	3			3				
Educationally								
subnormal	261	244	-	17	3	7		
Epileptic	11	7		$\overline{2}$		i	2	
Maladjusted	$\overline{2}$	1		1		ī		
Physically	_	_		_				
handicapped	52	5	27	16	1	1	4.	
Speech defect	60	60						
Delicate	149	12	137		12		***************************************	
Totals	572	329	164	71	16	12	6	

SPEECH THERAPY

Report by the Speech Therapist

During 1957 60 children have received treatment at the Speech Clinic. The numbers and varying speech disabilities were as follows:—

37 Stammerers	{	30 boys 7 girls
20 Dyslalics	(13 boys 7 girls
2 Cleft Palate Cases	{	1 boy 1 girl
1 Spastic	{	1 girl

There were already 41 children under treatment at the beginning of the year and another 19 were admitted from time to time as vacancies occurred.

New cases

Of these new cases to be admitted for treatment, the proportions and types of defect were as follows:—

11 Stammerers		10 boys 1 girl
7 Dyslalics	{	7 boys
1 Spastic	{	1 girl

Discharges

During the year 27 children have been discharged from the Clinic. There follows the detailed analysis of these cases:—

ic. Piloto lotto io		•
13 Stammerers	11 boys 2 girls	4—Speech normal (3 boys, 1 girl) 3—Left school with very considerable improve- ment—3 boys 5—Unwilling to attend for further treatment—5 boys 1—Unable to attend for health reasons—1 girl
12 Dyslalics	7 boys 5 girls	11—Speech normal—(6 boys, 5 girls) 1—Left school with great improvement achieved— 1 boy 1—Unwilling for treatment 1 boy
1 Cleft Palate Case	1 boy	 Leaving school but practically ready for discharge having made excellent progress since denture was fitted
1 Spastic	1 girl	This child was not strictly in need of speech therapy, her speech being perfectly intelligible. It was thought however, that some reading and rhythmic work might help her lack of control and concentration. I think she made some improve-

ment.

Remarks

It will be noticed how continuously the number of boys needing treatment for stammers exceed those of girls, and this follows the generally accepted statistics throughout the country.

The number of those unwilling to continue treatment after a period is somewhat disappointing this year. Almost every case was in the 11-12 group, a time at which it seems there is probably less positive interest in speech treatment than at any other. This is very marked among boys and may be, in part due to the transition from junior to senior school and the new interests in school at such a time. It is seen also in those with poorer intelligence levels.

Attendance has been unexpectedly improved and apart from an odd case (one of those who belong to the above category generally), there has been need for little or no rounding up of continuous absentees.

This has allowed time for more positive school and home visiting and a great many visits of both kinds have been made during 1957. The co-operation in the schools is, on the whole, very readily given and in a few cases is outstandingly helpful.

I would like, in this connection, to mention very specially the co-operation given by the headmaster of a junior school which has a great many children, rehoused from the poorer parts of Gateshead, and whose speech (while not always defective enough to warrant a clinic place until after the waiting list of more severe cases has been treated) does show substitutions and slovenliness and in certain instances slight lisps. On his own initiative this headmaster has formed a group of such children and with some suggestions for exercises from me and a great deal of work on his own part, is giving regular help to these children himself. Visiting the school and hearing the children after some time, I found unquestionable improvement. This is a most valuable contribution to the work of a Speech Therapist anywhere, and particularly in an area where there are large numbers of these "border line" speech cases.

MARGARET BARNES.

Speech Therapist.

13. ARRANGEMENTS FOR THE PROVISION OF MEALS

The school meals service is able to supply all demands for mid-day meals, though the number availing themselves of meals during the school holidays is disappointing. 4,555 mid-day meals were provided daily and 14,562 children received the daily ration of milk.

14. NURSERY SCHOOLS

There are three nursery schools accommodating 80 children below the age of 5 years. 118 first and 107 subsequent examinations were made.

Dental caries and skin conditions were the commonest defects requiring treatment. A number of cases of strabismus were immediately sent for treatment.

Defects found during the examinations requiring treatment or observation were:—

	Treatment	Observation
Eye defect (including squint)	 8	5
Skin conditions	 11	1
Orthopaedic defects	 2	10
Dental caries	 11	
Enlarged tonsils and adenoids	 	22
Enlarged glands	 	13
Bronchitis and other chest conditions	 1	7
Miscellaneous defects	 15	15
Totals	 48	73

As regards cleanliness, 1 child was fleabitten, 10 had nits and 4 were generally dirty.

On the whole, the health of the children attending the nursery schools is satisfactory.

15. DUKESHOUSE WOOD CAMP SCHOOL, HEXHAM

During nine months of the year approximately March to December, parties of senior school children spend a period of two weeks at this school.

A resident nurse deals with minor ailments. She treated 359 children and reported that 1,052 treatments were given. In addition, 16 children were admitted to the sick bay.

One child was admitted to Hexham General Hospital suffering from appendicitis. Two children had lacerations sutured at Hospital. In September, an epidemic of influenza developed. This involved 43 children from Middlesbrough and 9 from Gateshead. The illness was mild and when the infection abated the school was closed for two days to allow disinfection. No further cases occurred.

16. HIGHER EDUCATION

Those pupils born in 1942 attending the Grammar School were given routine examinations. The physical condition of these children remains consistently good.

Among the 154 pupils examined the following defects were noted:—

		equiring reatment	Requiring further observation
Eye defects	 	49	9
Orthopaedic defects	 	3	2
Skin defects	 	2	10
Miscellaneous defects	 	2	1
		56	22

Higher Education of Handicapped Pupils

One male received training at the Royal Victoria School for the Blind.

17. MISCELLANEOUS

There were 5 deaths in children of school age during the year. The causes of deaths were:—

Influenza		2
Congenital malformation	ts	1
Toxo-plasmosis		1
Accident		1

Additional examinations during the year by school medical officers were:—

Under Employment of Children Bye-Laws	293
Of Boarded-out Children (for Children's	
Officer)	28
From the Juvenile Courts	18
Candidates for the Teaching Profession	51

MINISTRY OF EDUCATION INSPECTION RETURNS

TABLE 1

Medical Inspection of Pupils Attending Maintained Primary and Secondary Schools (including special schools)

A. Periodic Medical Inspection

Number of Inspections in the prescribed Groups: —

Entrants Second Age Group Third Age Group (Leavers)	1,567 2,048 1,352
Total	4,967
Number of other Periodic Inspections	
Grand Total	4,967

B. Other Inspections

	Special Inspections Re-inspections	• • •	 $5,990 \\ 3,125$
		Total	 9,115

C. Pupils found to require Treatment

Age Groups Inspected (1)	For defective vision (excluding squint) (2)	For any of the other conditions recorded in Table III	Total individual pupils (4)
Entrants	7	339	343
Second Age Group	121	548	819
Leaver Group	388	269	571
Total	819	1,156	1,733
Other periodic inspections			
Grand Total	819	1,156	1,733

D. Classification of the Physical Condition of Pupils Inspected in the Age Groups Recorded in Table 1.A.

	Number	Sati	sfactory	Unsat	isfactory
Age Groups Inspected	of Pupils Inspected	No.	% of Col.(2)	No.	Col.(2)
(1)	(2)	(3)	(4)	(5)	(6)
Entrant	1,567	1,548	98.78	19	1.22
Second Age Group	2,048	2,021	98.69	27	1.31
Leaver Group	1,352	1,336	98.82	16	1.18
Additional Periodic Inst	pections —				
Total	4,967	4,905	98.76	62	1.24

TABLE II

Infestation with Vermin

(i)	Total number of individual examinations of pupils in schools	
	by the school nurses or other authorised persons	48,827
(ii)	Total number of individual pupils found to be infested	2,125
(iii)	Number of individual pupils in respect of whom cleansing	,
, ,	notices were issued (Section 54(2), Education Act, 1944)	2,125
(iv)	Number of individual pupils in respect of whom cleansing	,
,	orders were issued (Section 54(3), Education Act, 1944)	251

TABLE III

Return of Defects found by Medical Inspection

A. Periodic Inspections

			Periodic Inspections			(including	
					all other age		
			ntrants		Leavers	groups ir	
Defec	·t	Requiring	Requ'ing	Requ'ing	Requ'ing	Requ'ing	Requ'ing
Code		Treat-	Observa-	Treat-	Observa-	Treat-	Observa-
No.	Defect or Disease	ment	tion	ment	tion	ment	tion
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
4.	Skin	55	41	58	37	165	137
5.	Eyes a. Vision	7	6	388	66	819	195
	b. Squint	72	9	11	1	152	14
	c. Other	9	5	8	10	43	21
6.	Ears a. Hearing	9 5	44	7	21	24	88
	b. Otitis Media	5	9	9	3	15	13
	c. Other	13	8	7	11	34	30
7.	Nose and throat	33	239	8	111	74	573
8.	Speech	14	48	5	7	24	6 2
9.	Lymphatic glands	1				_	
10.	Heart	4	21		19	6	75
11.	Lungs	33	39	16	22	67	87
12.	Developmental						
	a. Hernia		3	2	2	4	11
	b. Other	1 2	45	3	12	20	112
13.	Orthopaedic						
200	a. Posture	4	5	11	9	50	20
	b. Feet	76	13	57	46	302	128
	c. Other	17	22	6	7	39	43
14.	Nervous system						
2	a. Epilepsy	1	1	1	1	7	3
	b. Other	$\bar{1}$	$1\overline{2}$	$\overline{4}$	23	16	71
15.	Psychological	_					
	a. Developmen	it 3	12	18	1	39	17
	b. Stability	2	6		$\overline{2}$	3	11
16.	Abdomen	$\frac{2}{1}$	$\overset{\circ}{2}$	1	ī	7	3
17.	Other	$3\overline{5}$	$\frac{-}{7}$	28	28	98	47
11.	Cilci	0.0	•	20		70	- 1

B. Special Inspections

T) (Special Inspections		
Defect Code No.	Defect or Disease	Requiring Treatment	Requiring Observation	
(1)	(2)	(3)	(4)	
4.	Skin	22	3	
4. 5.	Eyes a. Vision	99	19	
	b. Squint	8		
	c. Other	1	2 3 3	
6.	Ears a. Hearing	8	3	
	b. Otitis Media	3		
	c. Other	13	1	
7.	Nose and throat	15	15	
8.	Speech	18	1 3	
9.	Lymphatic glands			
10.	Heart	2	-	
11.	Lungs	4	3	
12.	Developmental			
	a. Hernia		1	
	b. Other	2	6	

13.	Orthopaedic		
	a. Posture	3	1
	b. Feet	8	3
	c. Other	41.	2
14.	Nervous system		
	a. Epilepsy	2	1
	b. Other	2	3
15.	Psychological		
	a. Development	41	
	b. Stability	1	
16.	Abdomen		-
17.	Other	1 3	9

TABLE IV

Treatment of Pupils attending Maintained Primary and Secondary Schools (including Special Schools)

Group 1. Eye Diseases, Defective Vision and Squint

	to have been dealt with	
	By the Authority	Otherwise
External and other, excluding errors of refraction and squint Errors of refraction (including squint)		9
Total	1023	9
Number of Pupils for whom spectacles were prescribed	814	

Group 2. Diseases and Defects of Ear, Nose and Throat

	Number of cases known to have been treated		
	By the Authority	Otherwise	
Received operative treatment:			
(a) for diseases of the ear		12	
(b) for adenoids and chronic tonsilitis		197	
(c) for nose and throat conditions		32	
Received other forms of treatment	77	46	
Total	77	287	
Total-number of pupils in schools who are known to have been provided with hearing aids			
(a) in 1957		6	
(b) in previous years		11	

Group 3. Orthopaedic and Postural Defects

		Aut	the hority	Otherwise
	of pupil _s known to have been treate inics or out-patient departments		491	324
		under	treatment	s treated or during the Authority
Group	4. Disease of the Skin			
	Ringworm—(i) Scalp (ii) Body Scabies Impetigo Other skin diseases		$ \begin{array}{c} 1 \\ 10 \\ 47 \\ \hline 58 \end{array} $	0 0 4
Group	5. Child Guidance Treatment			
0.047	Number of pupils treated at Child Guidance Clinics under arran made by the Authority		_	_
Croup	6. Speech Therapy			
Отопр	Number of pupils treated by Therapist under arrangements the Authority	made by		0
Group	7. Other Treatment given			
,	 (a) Number of cases of miscellaneous ailments treated by the Autho (b) Pupils who received convalescement under School Health 	rity ent treat- Service	65	7
	arrangements			
	(c) Pupils who received B.C.G. Va	ccination	57	6
	(c) Pupils who received B.C.G. Va (d) Other than (a), (b) and (c) about the orthoptic Total (ccination ove :	0.0	4
	(c) Pupils who received B.C.G. Va (d) Other than (a), (b) and (c) about the control of the contr	ccination ove :	33	4
	(c) Pupils who received B.C.G. Va (d) Other than (a), (b) and (c) abo Orthoptic Total (ccination ove: a)- (d)	33 1,56	4

(2)	Number found to require treatment	9,056
(3)	Number offered treatment	9,056
(4)	Number actually treated	6,312
(5)	Number of attendances made by pupils for treatment, including those recorded at 11(h)	12,344
(6)	Half days devoted to Periodic (School)	
	Inspection Treatment	$\begin{matrix} 82\\1,731\end{matrix}$
	Total (6)	1,813
(7)	Fillings: Permanent teeth Temporary teeth	5,048 1,478
	Total (7)	6,526
(8)	Number of teeth filled:	
(0)	Permanent teeth Temporary teeth	$3,801 \\ 1,200$
	Total (8)	5,001
(9)	Extractions:	
()	Permanent teeth Temporary teeth	2,134 7,231
	Total (9)	9,365
	Administrations of general anaesthetics for extraction	3,271
(11)	Orthodonties:	7.45
	(a) cases commenced during the year(b) cases carried f'ward from previous year	145 46
	(c) cases completed during year	12
	(d) cases discontinued during year	17
	(e) Pupils treated with appliances	145
	(f) Removable appliances fitted	191
	(g) Fixed appliances fitted	_
	(h) Total attendances	1,169
(12)	Number of pupils supplied with artificial dentures	47
(13)	Other operations:	
	Permanent teeth Temporary teeth	$\substack{3,017\\55}$
	$Total~(13)~\dots$	3,072



J. DOUNTE & JOH GATESHEAD.